

USSN 09/211,507

Response

**Amendments to the Specification:**

Please replace the paragraph beginning at page 5, line 20, with the following amended paragraph:

Preferably, prior to the administration of the odorant, the individual undergoes olfactory testing according to a test such as the University of Pennsylvania Smell Identification Test (UPSIT), a 40-question forced-choice, scratch-and-sniff identification test, and the Chicago Smell Test, a 3-item detection and identification test (R. Doty, *The Smell Identification Test: Administration Manual* 1983: 13-14, Philadelphia: Sensonics, Inc. (1983); A.R. Hirsch et al., *Chemical Senses* 18(5): 570-571 (1993); A.R. Hirsch et al., *Chemical Senses* 17(5): 643 (1992)). The individual can also be evaluated for olfactory capacity (e.g. loss of smell) according to an olfactory threshold test as known and used in the art. Such a test provides a precise magnitude of loss of smell and classifies the individual as normosmic, hyposmic or anosmic, which is useful in assessing the effectiveness of a particular odorant and/or the required concentration of the odorant to provide a suprathreshold level to effectively increase or decrease blood flow to the vagina-reduce migrainous symptoms. According to that test, an odorant substance such as butyl alcohol, phenyl ethyl alcohol, or pyridine, is combined in an odorless liquid medium to provide a series of dilutions, or binary steps, of the odorant. For each successive binary step up the dilution scale, the odorant is present, for example, at one half the concentration of the preceding step. The highest concentration of the odorant usually provides the substance at an irritant level. The individual is presented with the series of dilutions in ascending order, and is asked to compare each dilution step to at least one control stimulus, such as odorless propylene glycol.